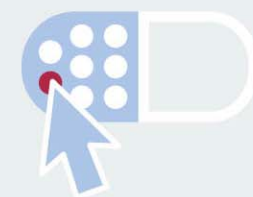


Forces Leading Towards the Adoption of ePrescribing

Presented by

Kate Berry

SureScripts-RxHub



E-Prescribing Overview

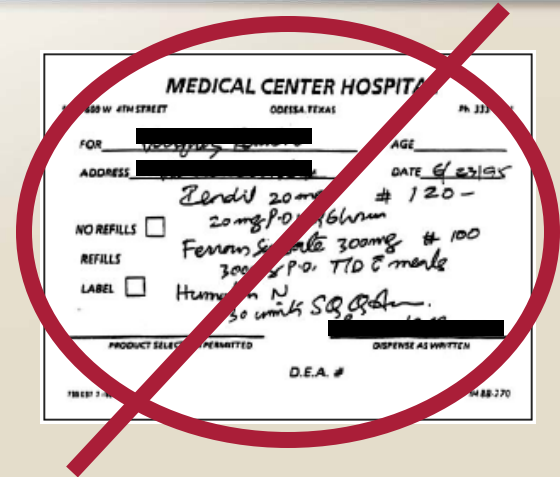
Definition of E-Prescribing



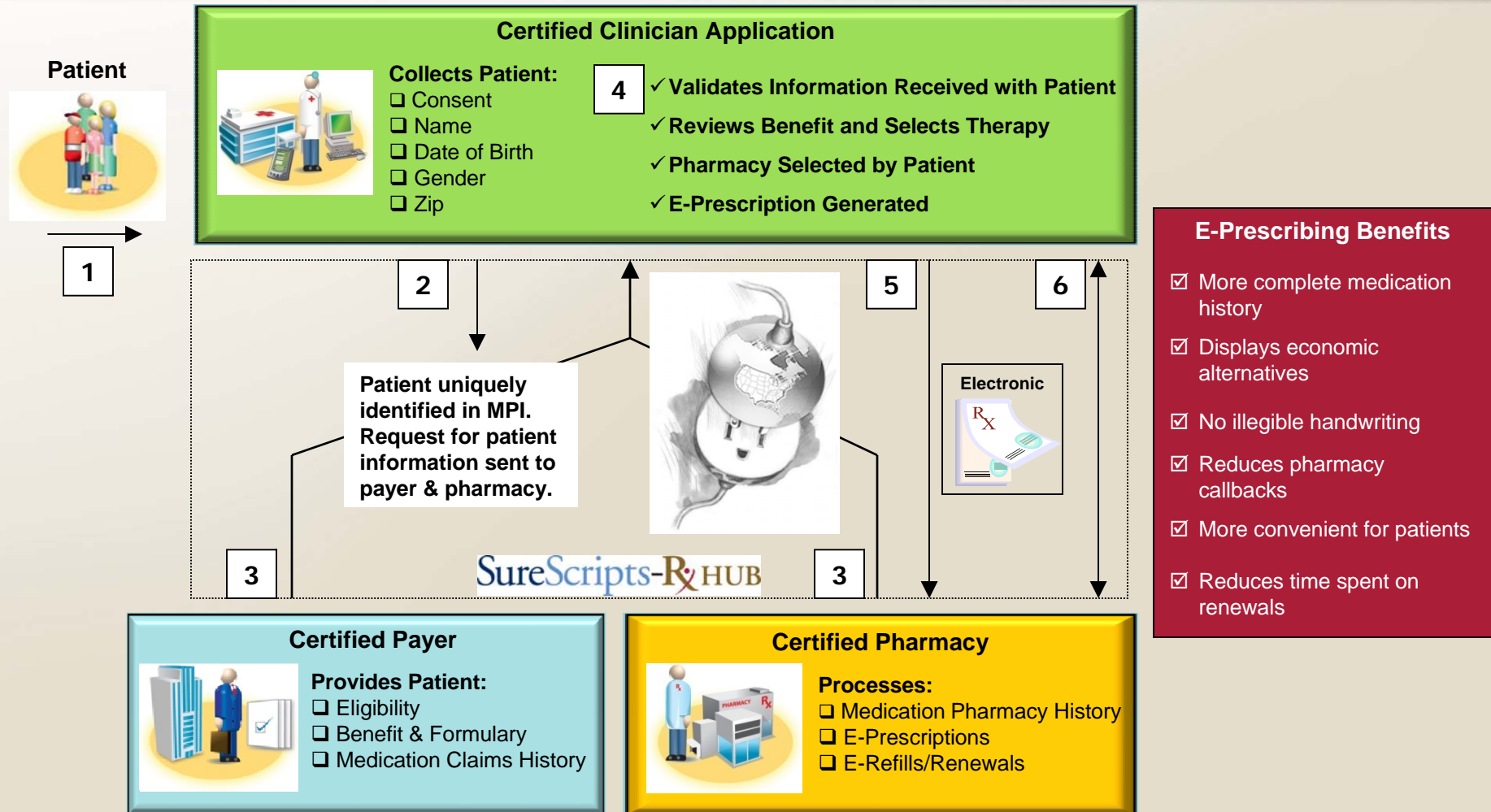
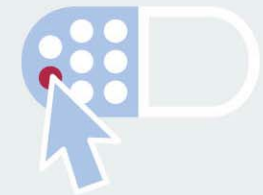
Prescribing without paper.

When a physician uses a computer or hand held device with software that allows them to:

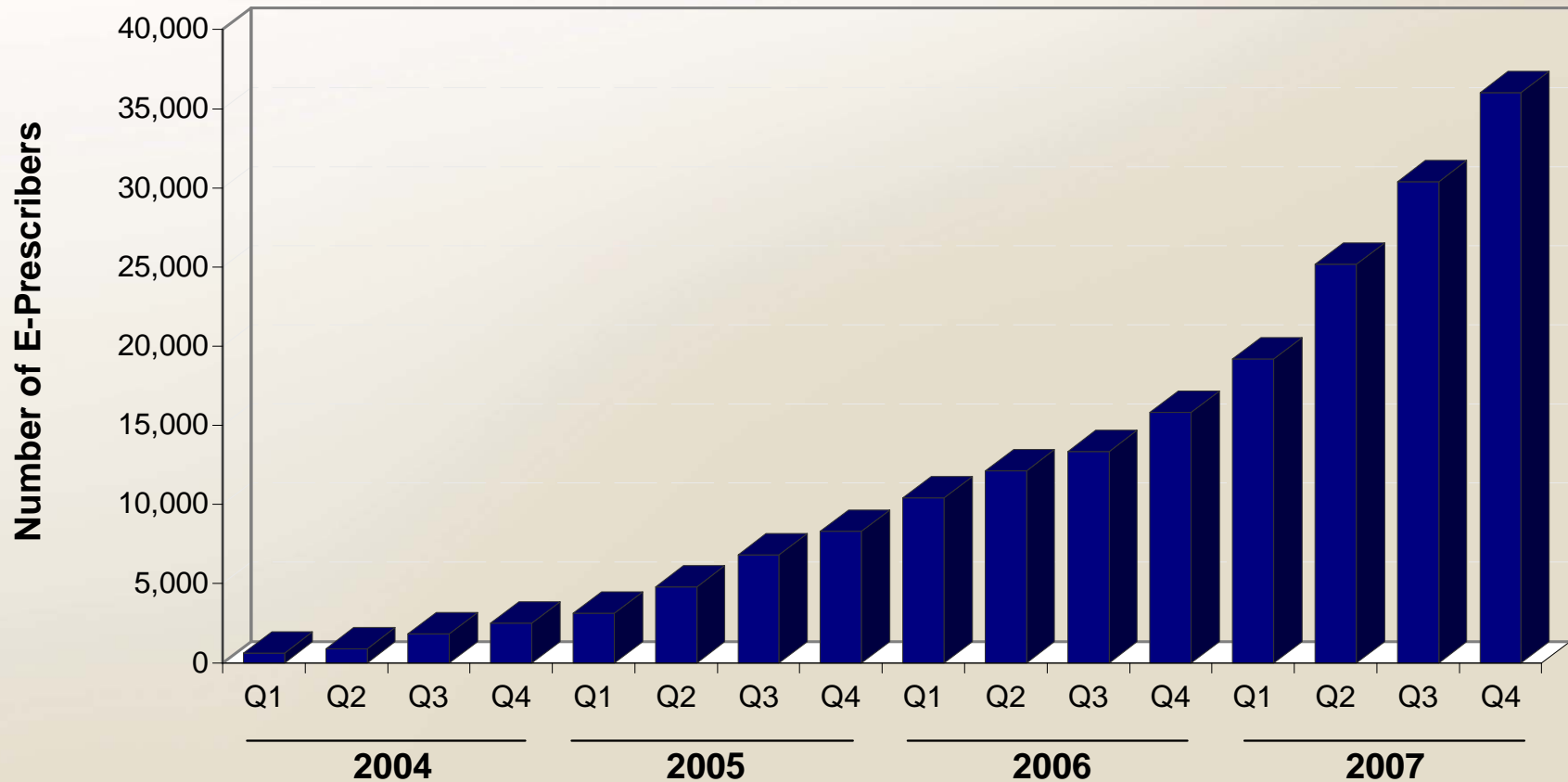
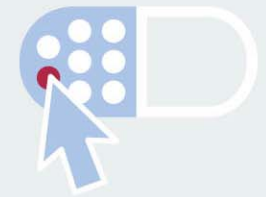
1. With a patient's consent, electronically access information regarding a patient's drug benefit coverage and medication history.
2. Electronically transmit the prescription to the patient's choice of pharmacy.
3. When the patient runs out of refills, their pharmacist can also electronically send a renewal request to the physician's office for approval.



E-Prescribing - A Scenario

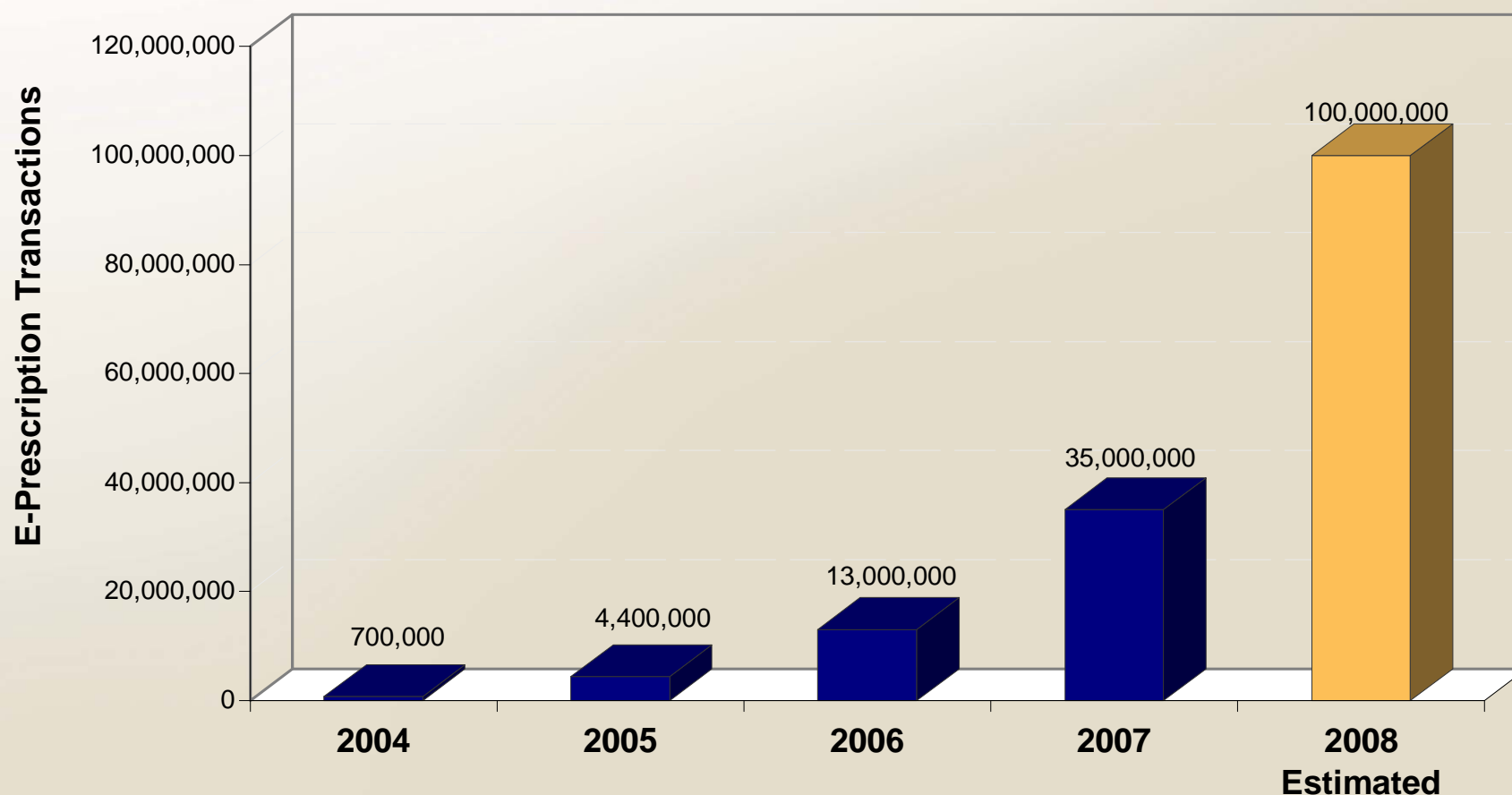


E-Prescribers: Quarterly Growth



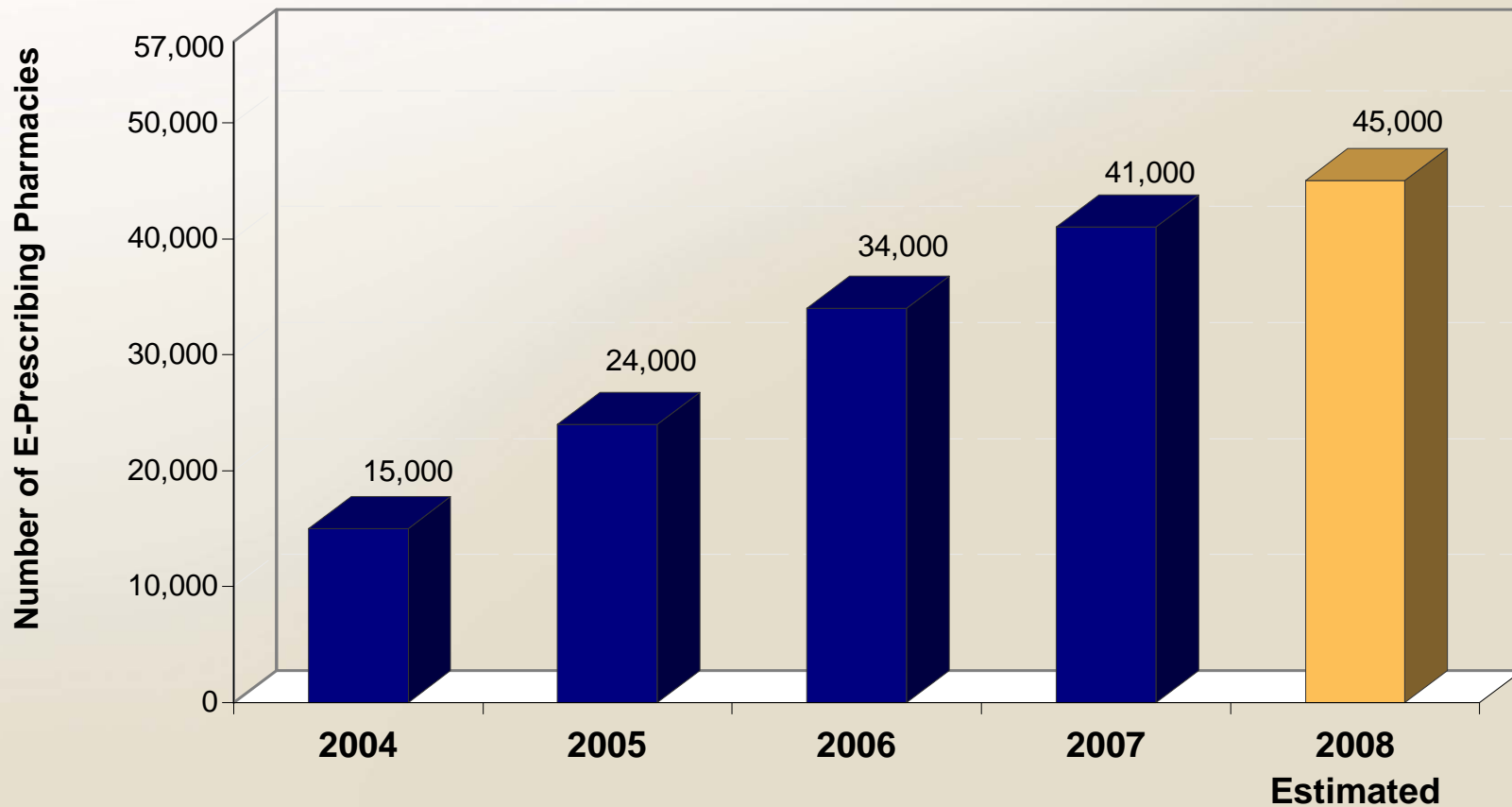
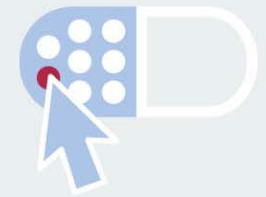
Source: Pharmacy Health Information Exchange, operated by SureScripts (December 2007).

E-Prescription Transactions – Annual Growth



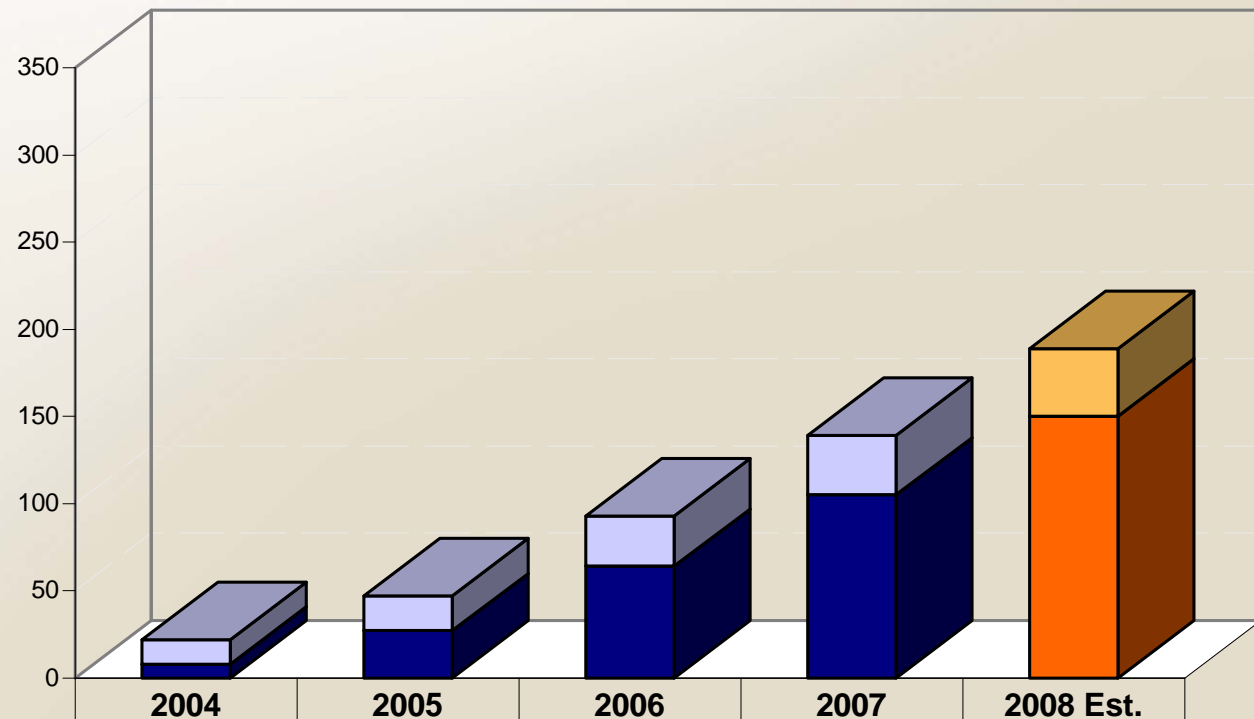
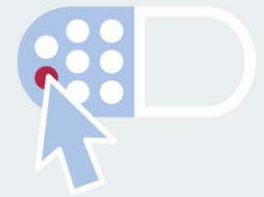
Source: Pharmacy Health Information Exchange, operated by SureScripts (December 2007).

E-Prescribing Pharmacies – Annual Growth



Source: Pharmacy Health Information Exchange, operated by SureScripts (December 2007).

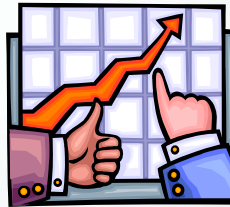
E-Prescribing - Certified Solution Providers



	2004	2005	2006	2007	2008 Est.
TOTAL	22	47	93	139	189
Pharmacy Tech Vendors	14	20	29	34	39
Physician Tech Vendors	8	27	64	105	150

Source: Pharmacy Health Information Exchange, operated by SureScripts (December 2007).

Progress Report



Starting at “0” in 2003...vs. estimates for full year 2008:

Member Records	200 million (66%)
Patient Visits*	70 million (14%)
E-Prescribers	85,000 (15%)
E-Prescribing Retail Pharmacies	45,000 (79%)
E-Prescribing Mail Order Pharmacies**	6 of the Top 10 (70%)
E-Prescriptions	100 million (6%)

*Patient eligibility, formulary and medication history requests. National Center for Health Statistics estimates 964 million patient visits per year.

**Percent of prescriptions processed by these mail order pharmacies

E-Prescribing - What's working well?

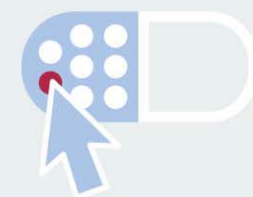


- **Industry's Technical Readiness**
 - Pharmacy, Prescriber, and Network Solution Providers
 - Transaction Standards and Organizations
 - End User Pharmacies and Early Adopter Prescribers
- **Strategic Understanding of its Importance**
 - National Safety Organizations and Studies
 - Federal & State Legislative, Financial, and Regulatory Support
 - Investment in the Future by Private Industry
- **Momentum and Participation by Key Organizations**
 - Medicare Part D legislation which promotes e-prescribing
 - Payor, Employer, and Health System Adoption Programs
 - Competition among the States to be top in e-prescribing

E-Prescribing – What are today's barriers?



- **Individual Understanding of Importance and Value**
 - Thousands of prescribers and pharmacies have systems capable of e-prescribing but have not requested activation
 - Perceived disconnect between costs and benefits
- **DEA Regulations on Controlled Substances**
 - Dual workflow makes e-prescribing impractical for prescribers
 - July 2008 Proposed Rules from DEA still a barrier
- **Concerns regarding Data Sharing**
 - Patient Consent & Privacy
 - Sensitive Medication Regulations
 - Liability regarding Use of Data
- **Variations and Changes in State Regulations**
 - One national standard, but, potential for varying implementations
 - Coordination between Boards of Pharmacy & Standards Organizations



The Business Case for E-Prescribing

Importance of E-Prescribing: Saving Time/Money



- **MGMA**

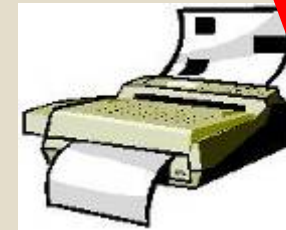
- E-prescribing with pharmacy interoperability can significantly reduce the **\$10,000 spent annually per physician** on phone calls with pharmacies related to prescription refills¹

- **SureScripts**

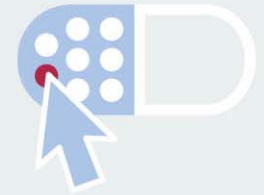
- Refills management costs **\$50,000 a year/per practice**²
- Practices spend on average **4.78 to 4.92 hours/day**² managing refills
 - Prescribers spend on avg. 1.84 – 1.88 hrs/day
 - Staff spend on avg. 2.94 to 3.04 hrs/day

- **MMA E-Prescribing Pilots**

- **Average time spent per day on renewals was cut in half**³

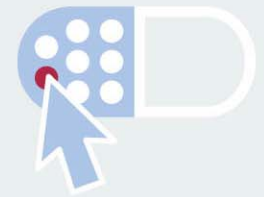


Importance of E-Prescribing: Saving Time/Money



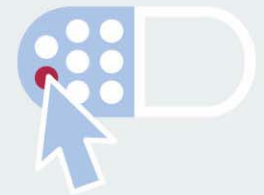
- Drug Spending
 - Based on generic usage and formulary compliance, health plans could save between \$.75 and \$3.20 per prescription
(CGE&Y, IMS Health and Allscripts)
- Henry Ford Health System
 - Improved Generic Use Rate
 - Henry Ford Medical Group = 20%
 - Health Alliance Plan = 71%
 - Reduced Administrative Costs
 - 2 minutes per script
 - \$.03 per script pad savings
- Blue Cross Blue Shield of Massachusetts (BCBSMA)
 - 81 percent of prescribers would recommend e-prescribing
 - 71 percent of respondents say e-prescribing saves time
 - Majority say 1 -2 hours per day

The Business Case for E-Prescribing



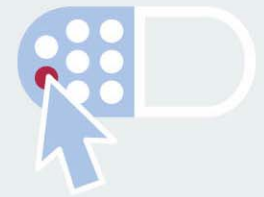
- Dr. Mark Fracasso, an OB/GYN specialist from Virginia
 - Staff now spends about 4 seconds per renewal authorization, down from 13 minutes prior to implementing electronic prescribing.
- Dr. Richard Olarsch, a Family Medicine physician from New Jersey
 - Saving as much as 5 hours a day by virtually eliminating prescription-related phone calls and faxes after he adopted an e-prescribing application.
- Dr. David Gorelick of Newport, Rhode Island
 - Estimates savings of roughly 10 hours each week, by having reduced the prescription-related phone and fax burden on the staff.
- Patricia Hernandez, PA-C of Richland, Washington
 - Electronic prescribing has taken a 15 minute process to approve a refill down to 15 seconds.
- Dr. Samuel Kelly of High Point, North Carolina
 - E-prescribing reduced the time spent managing prescriptions from 10% of total work hours to approximately 5%.

The Business Case for E-Prescribing



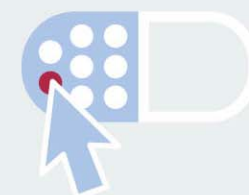
- Dr. Michael Randolph of Baltimore
 - Cites a tenfold increase in daily efficiency and ability to authorize and transmit 20-30 refill authorizations in a matter of seconds.
- Dr. Rebecca Andrews of New Britain, Connecticut
Dr. Kenneth Adler of Tucson, Arizona
 - Both report that e-prescribing has eliminated 2 hours a day previously spent managing charges and paper prescriptions.
- Dr. Gul Chablani in Rockville, Maryland
 - His practice formerly spent 3-4 hours/day to fulfill prescription refill requests, they now spend one hour/day. Clarification requests from pharmacies have been reduced from 6-10/day to nearly zero.
- Dr. Lorenever Po and Dr. Kenneth Aquilinio of Holyoke, Massachusetts
 - E-prescribing efficiencies allowed their practice to see an additional 3-5 patients each day, without having to work longer hours.
- Dr. Robert Resnik of Cary, North Carolina
 - In the last year alone, through a combination of reduced overhead costs and increased revenue (from being able to see more patients), his medium-sized practice saved roughly \$40,000.

The Business Case for E-Prescribing



Physicians using e-prescribing are vocal about the benefits they see for their practice and patients.

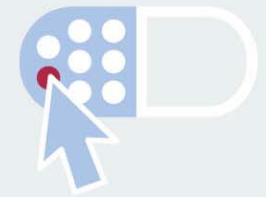
To read some first hand accounts, go to www.GetRxConnected.com.



About the merger:

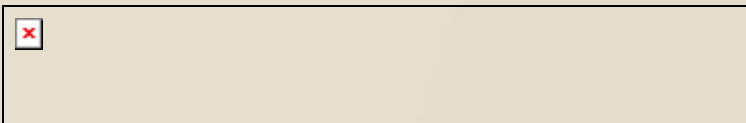
SureScripts and RxHub

SureScripts and RxHub



SureScripts

- *Formed in 2001 by pharmacy associations representing nation's 57,000 retail pharmacies.*
- *Focused on electronic prescription routing between physician practices and retail pharmacies.*

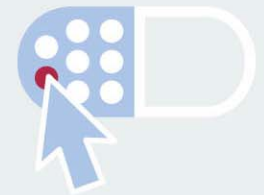


RxHub

- *Formed in 2001 by 3 largest PBMs and now provides access to more than 200 million patient records.*
- *Focused on patient pharmacy benefit and medication history information exchange between payers and physician practices.*



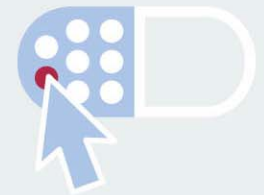
SureScripts-RxHub Merger



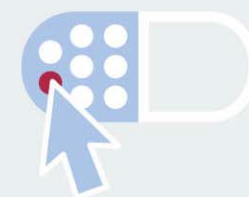
Core operating principles remain unchanged:

- Based on industry standards
- No charge to physicians or software vendors
- Preserves patient choice of pharmacy (mail or retail)
- Preserves physician choice of therapy
- No advertising or commercial influence
- No data mining
- Require patient consent to access medication history
- Continue operating as a low cost utility

SureScripts-RxHub Merger



- Speeds the transition to paperless prescribing
- More comprehensive medication history information reduces possibility of medication errors
- Expanding access to benefit info will save more patients money and ensure that more clean prescriptions arrive at the pharmacy electronically
- Streamline process for technology vendors to integrate SureScripts-RxHub services

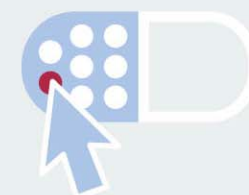


Regulatory Update

Deadlines Approaching



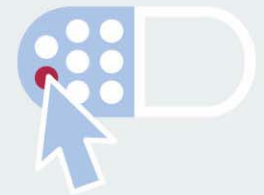
- January 1, 2009
 - Medicare E-Prescribing Incentives
 - ***Will provide Medicare payment incentives of up to 2 percent*** for practitioners who use qualified e-prescribing systems in 2009 through 2012.
 - The law permits the HHS Secretary to establish a hardship exception to providers who are unable to use a qualified e-prescribing system.
- April 1, 2009 - E-Prescribing Standards
 - ***NCPDP SCRIPT 8.1 will be the primary CMS adopted e-prescribing standard, retiring NCPDP SCRIPT 5.0***
 - The Medication History Standard will be an adopted standard
 - The NCPDP Formulary and Benefits Standard 1.0 will be an adopted standard
 - Prescription Fill Status Notification (RXFILL) will be an adopted standard
 - The National Provider Identifier (NPI) will be required to specify the identity of prescribers and pharmacies, but other identifiers (e.g., SPI) will still be able to be used for transaction routing
- January 1, 2012
 - Elimination of the "fax exemption"
 - ***Beginning January 1, 2012, all electronic prescriptions for Part D patients must comply with the NCPDP Script Standard***



Once you get started...

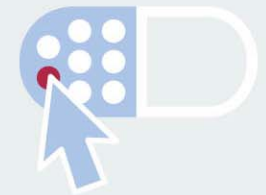
...we are there to help you succeed!

High-Low Connected EMR Practice Evaluation



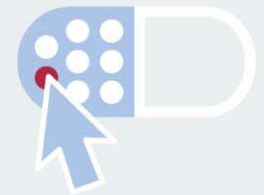
- The Center for Improving Medication Management has completed a project with the objective to enhance the understanding of why similar practices using similar connected EMRs experience different levels of success with e-prescribing in terms of:
 - Adoption
 - Utilization
 - Workflow
 - Physician, staff and patient satisfaction
 - And overall sense of how the technology can improve the practice's business performance and quality of care delivered
- Strived to identify key predictors of success and failure and translate those lessons learned into programs including best practices to implement and worst practices to avoid that can be disseminated by the Center, its founders, and other interested stakeholders

Drivers of Success with High Users



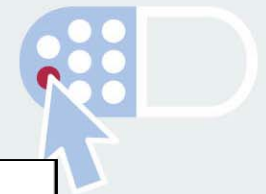
- Vision of paperless prescribing process
- Strong belief that technology will make it safer and more efficient so they stick with it
- Someone in charge of making it work who is the expert and problem solver, others willing to follow that leader, all use
- Financial incentives – profit sharing, subsidies, incentives for use, pay for performance
- Share e-prescribing utilization data with practice so there is peer pressure to e-prescribe rather than fax or print
- Good communication on e-prescribing within practice, with patient, with pharmacies, with vendor
- Proactively reach out to pharmacies and escalate issues for resolution

Problems Low Users Struggle With



- Inadequate training and information on e-prescribing from vendor
- Overwhelmed with implementation of EMR as a whole
- Do not know where to turn to address technical and workflow issues
- Accurate, timely pharmacy directory is critical and often practices are unaware
- Loss of physician / staff confidence in electronic transmission as a result of “script not found” and patient complaints so they print prescriptions
- Pharmacy Fax Refill Requests
- Vendor applications have awkward workflows and systems design, e.g., too many clicks, write/renew one prescription at a time
- Not all mail order is connected
- Very much want to make e-prescribing work but desperate for help and don’t know where to turn for answers

Rx for Success



www.rxsuccess.com

Your RX for Success...



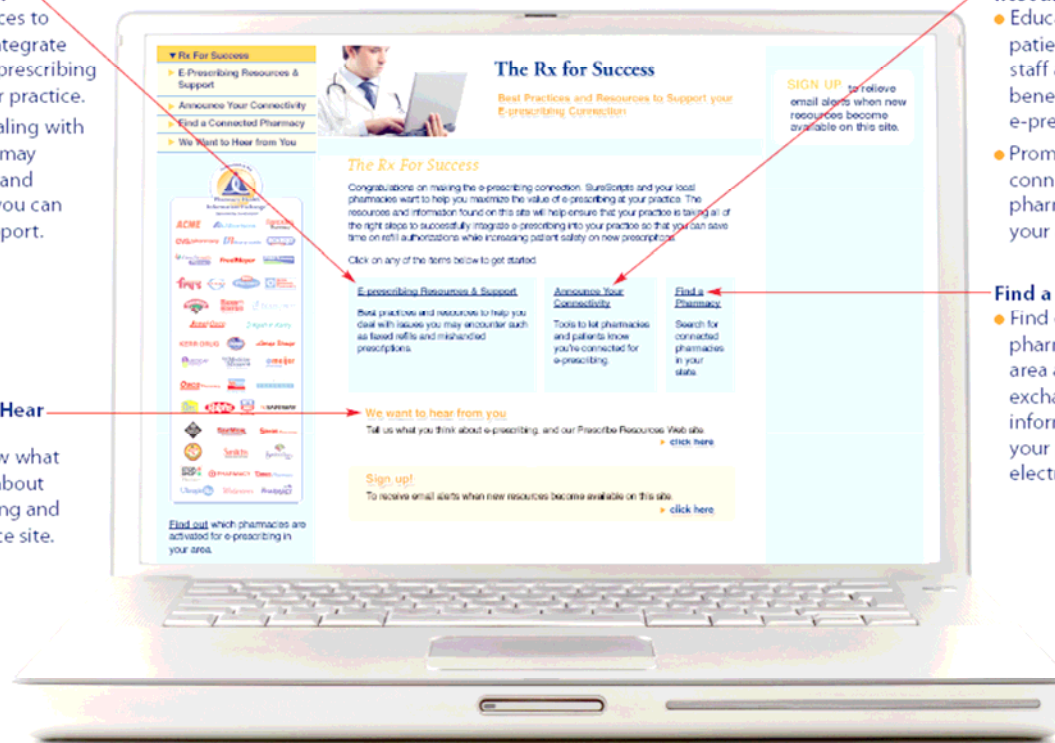
Visit this site for essential information, including:

E-Prescribing Resources and Support

- Best practices to help you integrate electronic prescribing within your practice.
- Tips for dealing with issues you may encounter and resources you can use for support.

We Want to Hear From You

- Let us know what you think about e-prescribing and our resource site.



Communication Resources

- Educate your patients and your staff about the benefits of e-prescribing.
- Promote your connectivity to pharmacies in your area.

Find a Pharmacy

- Find out which pharmacies in your area are ready to exchange prescription information with your practice electronically.

Rx For Success Program: E-Prescribing Resources and Support



- Best Practices
 - Purpose – enhance practice deployment of electronic prescribing
 - Encourage identification of practice champion
 - Set expectations for refill response.
 - Allow practices to better leverage benefits of connectivity
 - Incorporated into material, provided through website, technology provider training....

So you want to e-prescribe?

We applaud your decision to establish a secure two-way electronic connection between your practice and pharmacies in your area. This connection will allow your practice to achieve new levels of efficiency by replacing phone calls and faxes with the secure electronic exchange of refill authorizations and new prescription information.

To help, we've collected what we think are the most critical "Best Practices" to make electronic prescribing a success at your practice.

Please note that, once you start to send new prescriptions electronically, using your prescribing application, pharmacies will recognize your connectivity and will begin

to send you prescription refill requests electronically instead of by fax or phone. It is important then that you, and your staff, are prepared to respond to these incoming requests.

For more information about electronic prescribing, or to ask questions about the way your practice can integrate this connectivity, please contact the SureScripts Electronic Prescribing Resource Center at 1-866-RxReady (866-797-3239), or visit www.surescripts.com. SureScripts® operates the Pharmacy Health Information Exchange™, which provides the connectivity that allows the secure two-way exchange of prescription information between physician practices and the nation's largest network of pharmacies.

Implement the following Best Practices to get the most out of electronic prescribing.

1. Get the most benefit from your computer-to-computer connection with pharmacies by consistently sending new prescriptions electronically.

Your connectivity to pharmacies allows you to both receive and respond to prescription refill requests electronically, and send new prescriptions directly to the computers at pharmacies in your area. This can greatly improve the efficiency of your practice through reduced phone calls and faxes. Plus patients benefit from a more secure and accurate prescribing process.

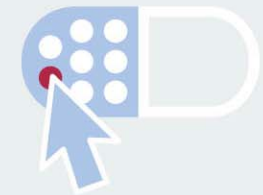
However these benefits cannot be realized to their full potential unless you consistently and frequently use your electronic prescribing application to send new prescriptions to pharmacies. In that way, pharmacies can recognize your practice's commitment to electronic prescribing communication and, in turn, will be more responsive to your communications and can provide higher levels of service to your patients.

2. Designate one primary clinician or staff person to retrieve and manage responses to authorization requests from pharmacies. That staff member, by becoming increasingly adept at using the electronic prescribing system, will elicit additional value from your investment by making the

process run more smoothly. They will also serve as a champion for e-prescribing in your practice, ensuring everyone gets on board. This person would also streamline the process by pulling charts and recommending whether to approve or deny the request. The physician or other authorized prescriber then, has only to provide final approval or rejection.

3. Communicate prescription fill-time expectations to your staff and patients, and make certain that both the pharmacy and patient know that your practice handles prescriptions electronically. Inform patients that, while the prescription is transmitted directly into the pharmacy's computer system, it does NOT necessarily mean it will be filled faster. Prescriptions are typically filled on a first-come, first-served basis. There is an advantage to electronic prescriptions in that a patient doesn't have to make a trip to the pharmacy to drop-off the prescription and another to pick it up. Patients should call the pharmacy to confirm that their prescriptions are ready before going to pick them up. Patients may also wish to mention that their prescriptions were sent electronically, rather than by telephone, fax or paper prescription.





Rx For Success Program: Communication Resources

- Essential to familiarize practice staff about new communication capability
- Also important, and beneficial, to involve pharmacies and patients.
- Rx for Success Program provides communication resources for all three
 - Talking Points, FAQs
 - Announcement letter to pharmacies
 - Patient notification cards
 - Patient Flyer.

To Our Valued Pharmacy Partner:

We'd like to let you know that our practice has recently enabled electronic prescribing by securing a connection to the Pharmacy Health Information Exchange™, operated by SureScripts®. The Pharmacy Health Information Exchange facilitates the secure transmission of prescription information between physicians and pharmacists, and provides access to life-saving information about patients during emergencies or routine care.

This means that we will be able to respond to refill authorization requests from pharmacies that are connected to this network electronically, as an alternative to time-consuming phone calls and faxes. We can also send new prescriptions directly to the computers at these pharmacies without typing, phoning, or writing a prescription.

If your pharmacy is the efficiency of electronic prescribing. If you are unsure and ask whether by SureScripts. Even if you're not, you can check this to confirm whether you also contact the pharmacy.

Yours Truly:

Name: _____
Position: _____
Pharmacy/Name: _____
Name of Pharmacist: _____
Address: _____
City: _____
Phone Number: _____
Email: _____
How would you like to receive information? _____

We're giving your prescription a "head start" before you ever leave the exam room.

Our practice can send prescriptions electronically to local pharmacies that are connected to the Pharmacy Health Information Exchange™, operated by SureScripts®. Instead of a paper prescription, we can send the same information directly to the pharmacy computer.

That means a safer and more efficient prescribing process for you.

► No more
► No trips
► No illegible handwriting
► Interpretation errors

We think you'll like it.


To Our Patients:

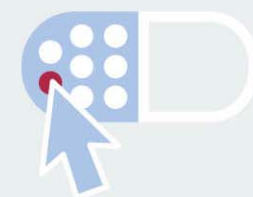
Our practice is committed to the safety, security and accuracy of your prescription.

That's why we've sent your prescription(s) electronically to your pharmacy using a secure network.

Please show your pharmacist this card to ensure he or she is aware your prescription has been sent electronically, and has been received by the pharmacy computer or fax.

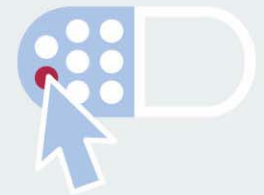
Thank you!


Connected to the
Pharmacy Health
Information Exchange™
Operated by SureScripts®



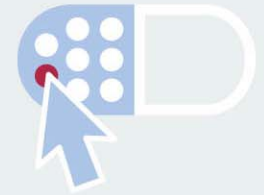
In closing...

E-Prescribing – What's Next?



- **Expanded Transaction Set and Utilization**
 - Widespread implementation of ChangeRx and CancelRx
 - Support for LTC, Compound Scripts, Queries to Doctors...
 - Take advantage of Codified Sig, RxNorm, NPI in transactions
- **High Value uses of Pharmacy Related Data**
 - Integration with Personal Health Records
 - Adherence, Compliance, and MTM Programs
- **Higher Level Healthcare Interoperability**
 - Sharing lab results, medical histories, not just pharmacy data
 - Between Providers (In-store Clinic, Primary Care, Specialist)
 - Between Healthcare Organizations and Exchanges
 - Integrated through Continuity of Care Records (CCR)

The Big Picture

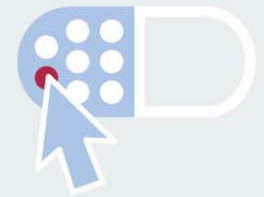


- **Technology has made it so much easier to securely share information**
- **This has dramatically improved so many parts of everyday life**
 - Paying bills and taxes
 - Managing personal finances
 - Reserving a flight, hotel, car
 - Shopping
 - Enjoying movies, music, games
 - Staying in touch with friends and family

Q: Why shouldn't something as fundamental as our healthcare benefit in the same way?

A: It can...and will...with your continued support.

For More Information



- Prescribers
 - GetRxConnected.com
 - RxSuccess.com
- Pharmacists
 - SureScripts.com
- Policymakers
 - SureScripts.com/Safe-Rx
- Consumers
 - LearnAboutEPrescriptions.com
- Media
 - SureScriptsRxHub.com/mediaguide
- All
 - TheCIMM.org



To subscribe to our daily newsletter, please visit:
www.surescripts.com/Surescripts/newsletter-signup.aspx

Thank You!